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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/633,590
	Filing Date	August 3, 2003
	First Named Inventor	CHAPPELL, J.
	Art Unit	1638
	Examiner Name	BAGGOT, Brendan O.
	Attorney Docket Number	8064-006-US
Total Number of Pages in This Submission		4

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Request for Correction of Attorney Docket Number and Information; Copy of Revocation of Power of Attorney; and Self Addressed Stamped Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Catalyst Law Group, APC		
Signature			
Printed name	Michael B. Farber, Ph. D., Esq.		
Date	August 16, 2006	Reg. No.	32,612

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Christina Duenas	Date	August 16, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT
8064-006-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	Examiner: BAGGOT, Brendan O.
)	
CHAPPELL, J. et al.)	Group Art Unit: 1638
)	
Serial No.: 10/633,590)	Docket No.: 8064-006-US
)	
Filed: August 5, 2003)	Date Mailed: August 16, 2006
)	
For: METHODS FOR SPLICING)	
PLANT GENES)	

REQUEST FOR CORRECTION
OF ATTORNEY DOCKET NUMBER & INFORMATION

Honorable Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Please correct the error noted on the enclosed copy of the Revocation of Power of Attorney in the above-identified patent application as follows:

The Revocation of Power of Attorney submitted to the USPTO on August 24, 2004 indicated that the attorney's docket number is "50229-380." This was a typographical error and the correct attorney docket number should be "8064-006-US."

In addition, please correct the attorney/agent information. The Revocation of Power of Attorney submitted in August 23, 2004 indicated that the change of correspondence address for the above-identified application be associated with Customer number 32301. The change of address has been updated accordingly; however the previous attorney "Judith Toffenetti" is still listed as the current attorney/agent. Please correct this information to reflect the agents associated with Customer Number 32301.

No other changes are made by this submission. If any issues remain, the Examiner is respectfully requested to telephone the undersigned at (858) 200-0581.

Respectfully submitted,

Date:

August 16, 2006

A handwritten signature in black ink, appearing to read "Michael B. Farber". The signature is fluid and cursive, with the first name "Michael" being more prominent than the last name "Farber".

Michael B. Farber, Ph.D., Esq.
Reg. No.: 32,612

CATALYST LAW GROUP, APC
9710 Scranton Road, Suite 170
San Diego, California 92122
(858) 450-0099
(858) 450-9834 (Fax)



AUG. 24. 2004 10:32AM

CATALYST LAW GROUP 858 450 9834

NO. 1033 P. 2

PTO/SB/62 (03-02)
Approved for use through 11/20/2005. OMB 0681-0033
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/633 590
	Filing Date	August 5, 2003
	First Named Inventor	The Chappell
	Art Unit	
	Examiner Name	
	Attorney Docket Number	50229-380

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

32301

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:

32301

OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/66)**SIGNATURE of Applicant or Assignee of Record**

Name

Donald G. Keach, Director

Signature

Date

August 27, 2004

Telephone

(858) 257-2300

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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